

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

WELL API NO. 30-059-20495
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other CO2 Supply Well <input type="checkbox"/>	7. Lease Name or Unit Agreement Name: Bravo Dome Carbon Dioxide Gas Unit 2433
2. Name of Operator OXY USA Inc.	8. Well Number 251
3. Address of Operator P.O. Box 4294 Houston, TX 77210-4294	9. OGRID Number 16696
4. Well Location Unit Letter <u>G</u> : <u>1900</u> feet from the <u>N</u> line and <u>1698</u> feet from the <u>E</u> line Section <u>25</u> Township <u>24N</u> Range <u>33E</u> NMPM County <u>Union</u>	10. Pool name or Wildcat Bravo Dome Carbon Dioxide Gas 640
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5173.7' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  
**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☒  
OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

See Attachment

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE [Signature] TITLE Sr. Regulatory Analyst DATE 04/27/09  
E-mail address: Kimberly\_Long@oxy.com  
Type or print name Kimberly Long Telephone No. 713-215-7643

**For State Use Only**

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 4/29/09  
Conditions of Approval, if any:

Page 2 (C-103 Attachment)

SPUD 08/03/08

DRILL 12 1/4" HOLE TO 793'

RIH W/ 8 5/8" 24#J55 CSG & SET @ 780'

CEMENT W/ 400 SX IFC CEMENT YIELD 1.36 @ 14.8 PPG; CIRCULATE 125 SX TO SURFACE; WOC

DRILL 7 7/8" HOLE TO 2900'

RIH W/ 5 1/2" 5.3#FG 15.5# J55 CSG & SET @ 2888'

CEMENT W/ 200 SX PP W 2% CACL2 @ 11.1 PPG YIELD 3.27; FOLLOWED BY 150 SX PP W 3% CACL2 @ 13.2 PPG 1.86 YIELD; CIRCULATE 108 SX TO SURFACE; WOC

RELEASE RIG 08/09/08